

United States Of America  
Department of Transportation - Federal Aviation Administration  
**Supplemental Type Certificate**

*Number* SA7856SW

*This Certificate issued to* The Servicenter, Inc.  
Wiley Post Airport  
7301 N. W. 50th St.  
Bethany, OK 73008

*certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 3 of the Civil Air Regulations.*

*Original Product Type Certificate Number :* 2A4

*Make :* Gulfstream

*Model :* 680T, 680V, 680W, 681, 690, 690A, 690B,  
690C, and 695

*Description of Type Design Change:*

Replace existing aft baggage door hinges with external hinges in accordance with Gulfstream Aerospace Drawings 690-100, IR, dated 11-27-88; 690-300, IR, dated 11-27-88; E.O. 88-41-1, NC, dated 8-1-90 & E.O. 88-41-2, NC, dated 8-1-90 or later FAA approved revisions.

*Limitations and Conditions:*

Compatibility of this modification with previously installed equipment must be determined by installer.

*This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.*

*Date of application :* March 12, 1990

*Date reissued :* 05/11/92, 09/14/98

*Date of issuance :* August 23, 1990

*Date amended :*



*By direction of the Administrator*

*Michele M Owsley*  
(Signature)

Michele M. Owsley  
Manager, Airplane Certification  
Office, Southwest Region

(Title)

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

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### TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number \_\_\_\_\_

to *(Name of transferee)* \_\_\_\_\_

*(Address of transferee)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

from *(Name of grantor) (Print or type)* \_\_\_\_\_

*(Address of grantor)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

Extent of Authority (if licensing agreement): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Transfer: \_\_\_\_\_

Signature of grantor *(In ink)*: \_\_\_\_\_